## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE **Commissioner for Patents** P.O. Box 1450 Alexandria, Virginia 22313-1450 (571) 273-2885

or Fax

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)				Note: A cert	Note: A certificate of mailing can only be used for domestic mailings			
26171	7590	11/13/2008		of the Fee(s) accompanying formal drawing	of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
FISH & RICHARD P.O. Box 1022			I hereby cert United States in an envelop or being faces below.	Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.				
Minneapolis, MN 55440-1022							(Depositor's name)	
							(Signature)	
							(Date)	
APPLICATION NO.	FILING DATE	FIRST NAMED		D INVENTOR	INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO.			
10/595,567	04/27/2006	Kiyosh		i Kato	Kato 12732-0335US1 PCT/US7477		2837	
						101/05/4//		
TITLE OF INVENTION: SE	MICONDUCTOR INTEGRAT	ED CIRCUIT AN	ID DESIGN N	IETHOD THEREO	F			
APPLN. TYPE	SMALL ENTITY	ISSUE I	FEE	PUBLICATION FEE		TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$151	0	\$300		\$1810	02/13/ <del>200</del> 9	
EXAMINER		ART UNIT		CLASS-SUBCLASS				
DIMYAN, MAGID Y		2825	3	716-006000				
1. Change of correspondence CFR 1.363).	`	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  1. Fish & Richardson P.C.  2. 3.						
[ ] Change of correspon Address form PTO/SB/12 [ ] "Fee Address" indica PTO/SB/47; Rev 03-02 c	orrespondence							
	D RESIDENCE DATA TO BE an assignee is identified below, he USPTO or is being submitte EE	no assignee data d under separate c	will appear or over. Comple				en an assignment has been	
Semiconductor Energy Laboratory Co., Ltd. Atsugi-shi, Kanagawa-ken, JAPAN								
Please check the appropriate assignee category or categories (will not be printed on the patent): 1 individual [X] corporation or other private group entity [ ] government								
4a. The following fee(s) are [X] Issue Fee [X] Publication Fee (No: [ ] Advance Order - # of	)	<ul> <li>4b. Payment of Fee(s):</li> <li>A check in the amount of the fee(s) is enclosed.</li> <li>Payment by credit card. Form PTO-2038 is attached.</li> <li>The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 06-1050 (enclose an extra copy of this form).</li> </ul>						
[ ].a. Applicant claims SI	(from status indicated above) MALL ENTITY status. See 37					LL ENTITY status. See 37	1077 1 1	
NOTE: The issue Fee and F	is requested to apply the Issue Publication Fee (if required) wi Untied States Patent and Trade	Il not be accepted	on Fee (if any from anyone	) or to re-apply any other than the applic	previously pa cant, a registe	aid issue fee to the application red agent or; or the assignee	on identified above. or other party in interest as	
(Authorized Signature)				(Date) February 12, 2009				
Typed or Printed Name Hussein Akhavannik				Registration No59,347				
an application. Confidentia submitting the completed ap form and/or suggestions for 1450, Alexandria, Virginia 2 Alexandria, Virginia 22313-	on is required by 37 CFR 1.311 lity is governed by 35 U.S.C. 1 pplication form to the USPTO. reducing this burden, should b 22313-1450. DO NOT SEND F.1450.	22 and 37 CFR 1. Time will vary dependent to the Chief EES OR COMPL	14. This colle pending upon Information LETED FORN	ction is estimated to the individual case. Officer, U.S. Patent AS TO THIS ADDR	take 12 minu Any commen and Tradema RESS, SEND	ites to complete, including gents on the amount of time your office, U.S. Department of TO: Commissioner for Paten	athering, preparing, and ur require to complete this of Commerce, P.O. Box atts, P.O. Box 1450,	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.